



State of New Hampshire  
**WATER WELL BOARD**



Bart C. Cushing, *Pump Installer, Chairman*  
Jeffrey M. Tasker, M.G.W.C., *Water Well Contractor*  
Peter W. Caswell, C.W.D., *Water Well Contractor*  
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Thomas Garside, *Technical Driller*  
Rene Pelletier, *Dept. of Environmental Services*  
David R. Wunsch, Ph.D., *State Geologist*  
Richard P. Schofield, P.G. *Staff*

## 2007-2008 LICENSE RENEWAL FORM

Your New Hampshire Water Well Contractor and/or Pump Installer license renewal is due June 30, 2007 for the 2007-2008 renewal period. If not renewed, your license expires on July 1, 2007, in accordance with the requirements of RSA 482-B.

### License Renewal Fees (Check all that apply)

#### Water Well Contractor license:

- ☐ \$225 - Rotary Drilling  
☐ \$225 - Technical Drilling  
☐ \$150 - Cable Tool, Wash, or Point Well  
☐ \$100 - Dug Well

#### Pump Installers License:

- ☐ \$100 - Pump Installer License  
- 2 hours of continuing education  
- **attach proof of hours to renewal form**

Please pay only the highest fee for the Water Well Contractor license category held and/or the \$100.00 fee for Pump Installer license, if applicable. Do not add fees for multiple Water Well Contractor license categories. If your license is not renewed by 8/1/2007 an additional \$20.00 late fee for Water Well Contractor license and \$20.00 late fee for Pump Installer license will be assessed.

License # \_\_\_\_\_ Qualified Individual \_\_\_\_\_  
Company \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

**Number of vehicles:** Well construction machines: \_\_\_\_\_ Pump service trucks: \_\_\_\_\_

If you do **not** wish to renew your license, please check the space provided so that we may update our records accordingly.

\_\_\_\_\_ Yes, renew my license. (Make check payable to; **New Hampshire Water Well Board**)  
\_\_\_\_\_ No, do not renew my license.

If you have any questions, please contact Chip Mackey at (603) 271-2410 or e-mail, [hmackey@des.state.nh.us](mailto:hmackey@des.state.nh.us)

**COMPLETE FORM, sign, date (pump installers attach proof of your continuing education) and include a check or money order made payable to:**

**New Hampshire Water Well Board  
PO Box 95  
Concord, NH 03302-0095**

Amount enclosed: \_\_\_\_\_

Signature (Qualified Individual): \_\_\_\_\_ Date: \_\_\_\_\_